INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case 19-CA-266977

Date Filed 10/1/2020

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the	ne alleged unfair labor practice occurred or is occur AGAINST WHOM CHARGE IS BROUGHT	ring.		
a. Name of Employer	AGAINST WHOM CHARGE IS BROUGHT	b. Tel. No. 206-266-8122		
Amazon.com				
		c. Cell No.		
		f. Fax No.		
d. Address (Street, city, state, and ZIP code)	e. Employer Representative			
410 Terry Ave N. Seattle, WA 98109	D-#- O-I-#	g. e-Mail		
	Beth Galetti SVP Human Resources, P.O. Box	galettib@amazon.com		
	81226, Seattle, WA, 98109	 h. Number of workers employed thousands 		
i. Type of Establishment (factory, mine, wholesaler, etc.) Online Retailer	j. Identify principal product or service Worlwide sales of various products a	and services		
k. The above-named employer has engaged in and is engaging	in unfair labor practices within the meaning of se	ection 8(a), subsections (1) and (list		
subsections) (1) (3)	of the National La	abor Relations Act, and these unfair labor		
practices are practices affecting commerce within the meaning within the meaning of the Act and the Postal Reorganization		unfair practices affecting commerce		
2. Basis of the Charge (set forth a clear and concise statement	of the facts constituting the alleged unfair labor p	oractices)		
Within the last six months, the Employer has violate	ted the Act by terminating the employment	_{ent of} (b) (6), (b) (7)(C) _{and}		
(b) (6), (b) (7)(C) in response to their lawful Section 7 a	activities, namely, their support for fello	w Amazon employees' working		
conditions.				
		1 (1) (2) (3)		
Also within the last six months, the Employer violate				
Also within the last six months, the Employer violat a discriminatory enforcement of policies or work ru				
a discriminatory enforcement of policies or work ru	les, including its non-solicitation and co	ommunication policies.		
a discriminatory enforcement of policies or work rule. Also within the last six months, the Employer has re-	les, including its non-solicitation and co	ommunication policies.		
a discriminatory enforcement of policies or work rule. Also within the last six months, the Employer has read restrain employees in the exercise of their Sec	les, including its non-solicitation and co maintained overly broad and unduly vag ction 7 rights and activities.	ommunication policies.		
a discriminatory enforcement of policies or work rule. Also within the last six months, the Employer has re-	les, including its non-solicitation and co maintained overly broad and unduly vag ction 7 rights and activities.	ommunication policies.		
a discriminatory enforcement of policies or work rule. Also within the last six months, the Employer has rule and restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give further bood and Commercial Workers Union, Local Commercial Commercial Workers Union, Local Commercial	les, including its non-solicitation and co maintained overly broad and unduly vag ction 7 rights and activities.	ommunication policies. gue policies or work rules that chill		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec 3. Full name of party filing charge (if labor organization, give fu United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code)	les, including its non-solicitation and comaintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21	gue policies or work rules that chill 4b. Tel. No. 206-436-6700		
a discriminatory enforcement of policies or work rule. Also within the last six months, the Employer has rule and restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give further bood and Commercial Workers Union, Local Commercial Commercial Workers Union, Local Commercial	les, including its non-solicitation and comaintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21	gue policies or work rules that chill 4b. Tel. No. 206-436-6700 4c. Cell No.		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec 3. Full name of party filing charge (if labor organization, give fu United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code)	les, including its non-solicitation and comaintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21	gue policies or work rules that chill 4b. Tel. No. 206-436-6700		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec 3. Full name of party filing charge (if labor organization, give fu United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code)	les, including its non-solicitation and comaintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21	gue policies or work rules that chill 4b. Tel. No. 206-436-6700 4c. Cell No.		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec 3. Full name of party filing charge (if labor organization, give fu United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code)	les, including its non-solicitation and comaintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21	db. Tel. No. 206-436-6700 4d. Fax No. 436-6700		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give fur United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9	maintained overly broad and unduly vagotion 7 rights and activities. If name, including local name and number) al No. 21	db. Tel. No. 206-436-6700 4c. Cell No. 436-6700 4e. e-Mail privera@ufcw21.org		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec 3. Full name of party filing charge (if labor organization, give fu United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9	maintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21	db. Tel. No. 206-436-6700 4c. Cell No. 436-6700 4e. e-Mail privera@ufcw21.org		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give fur United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9 5. Full name of national or international labor organization of worganization) United Food and Commercial Workers	maintained overly broad and unduly vagotion 7 rights and activities. If name, including local name and number) all No. 21	din when charge is filed by a labor		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give fur United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9	maintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21 18134	db. Tel. No. 206-436-6700 4c. Cell No. 436-6700 4e. e-Mail privera@ufcw21.org		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give fur United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9 5. Full name of national or international labor organization of worganization) United Food and Commercial Workers 6. DECLARATION I declare that I have read the above charge and that the statements	maintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21 18134	4b. Tel. No. 206-436-6700 4c. Cell No. 4d. Fax No. 436-6700 4e. e-Mail privera@ufcw21.org d in when charge is filed by a labor Tel. No. 206-436-6567 Office, if any, Cell No.		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give furul United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9 5. Full name of national or international labor organization of worganization) United Food and Commercial Workers 6. DECLARATION I declare that I have read the above charge and that the statements	maintained overly broad and unduly vagotion 7 rights and activities. Il name, including local name and number) al No. 21 Phich it is an affiliate or constituent unit (to be filled International Union, AFL-CIO	4b. Tel. No. 206-436-6700 4c. Cell No. 4d. Fax No. 436-6700 4e. e-Mail privera@ufcw21.org d in when charge is filed by a labor Tel. No. 206-436-6567		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give fur United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9 5. Full name of national or international labor organization of worganization) United Food and Commercial Workers 6. DECLARATION I declare that I have read the above charge and that the statements	maintained overly broad and unduly vagotion 7 rights and activities. If name, including local name and number) all No. 21 18134 Which it is an affiliate or constituent unit (to be filled International Union, AFL-CIO Is are true to the best of my knowledge and belief. Rivera, Lead Organizer (Print/type name and title or office, if any)	d in when charge is filed by a labor Tel. No. 206-436-6567 Office, if any, Cell No. 206-499-3691 (cell) Fax No.		
Also within the last six months, the Employer has rand restrain employees in the exercise of their Sec. 3. Full name of party filing charge (if labor organization, give fur United Food and Commercial Workers Union, Local 4a. Address (Street and number, city, state, and ZIP code) 5030 First Avenue South, Suite 200, Seattle, WA 9 5. Full name of national or international labor organization of worganization) United Food and Commercial Workers 6. DECLARATION I declare that I have read the above charge and that the statements	maintained overly broad and unduly vagotion 7 rights and activities. If name, including local name and number) all No. 21 Ships an affiliate or constituent unit (to be filled International Union, AFL-CIO) Ships are true to the best of my knowledge and belief. Rivera, Lead Organizer (Print/type name and title or office, if any)	din when charge is filed by a labor Tel. No. 206-436-6567 Office, if any, Cell No. 206-499-3691 (cell)		

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

Agency Website: www.nlrb.gov Telephone: (206)220-6300 Fax: (206)220-6305 Download NLRB Mobile App

October 1, 2020

Pia Rivera, Organizer United Food and Commercial Workers Union, Local 21 5030 1st Ave S, Ste 200 Seattle, WA 98134-2438

REGION 19

915 2nd Ave Ste 2948

Seattle, WA 98174-1006

Re: Amazon.com

Case 19-CA-266977

Dear Mr. Rivera:

The charge that you filed in this case on October 01, 2020 has been docketed as case number 19-CA-266977. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney ELIZABETH H. DEVLEMING whose telephone number is (206) 220-6280. If this Board agent is not available, you may contact Deputy Regional Attorney MARTIN ESKENAZI whose telephone number is (206) 220-6289.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence</u>: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

RONALD K. HOOKS

Rorald & Hooks

Regional Director

lu



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD



REGION 19 915 2nd Ave Ste 2948 Seattle, WA 98174-1006 Agency Website: www.nlrb.gov Telephone: (206)220-6300 Fax: (206)220-6305 Download NLRB Mobile App

October 1, 2020

Amazon.com 410 Terry Ave N Seattle, WA 98109

Re: Amazon.com

Case 19-CA-266977

Dear Sir or Madam:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney ELIZABETH H. DEVLEMING whose telephone number is (206) 220-6280. If this Board agent is not available, you may contact Deputy Regional Attorney MARTIN ESKENAZI whose telephone number is (206) 220-6289.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board

agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence:</u> All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

RONALD K. HOOKS Regional Director

Rorald & Hooks

Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

cc: Beth Galetti, SVP Human Resources Amazon.com, Inc. P.O. Box 81226 Seattle, WA 98109

lu

Please read carefully, answered all applicable items, and return to the NLRB Office. If additional space is required, please add a page and identify item number. CASE NAME					
AMAZON.COM EXACT LEGAL TITLE OF ENTITY (As filed with State and/or stated in legal documents forming entity) EXACT LEGAL TITLE OF ENTITY (As filed with State and/or stated in legal documents forming entity) EXACT LEGAL TITLE OF ENTITY					
Amazon.com 1 P-CA-266977 1. EXACT LEGAL TITLE OF ENTITY (As filed with State and/or stated in legal documents forming entity) 2. TYPE OF ENTITY [] CORPORATION [] LLC [] LLP [] PARTNERSHIP [] SOLE PROPRIETORSHIP [] OTHER (Specify) 3. IF A CORPORATION or LLC 4. STATE OF NOROPORATION OR FLC 5. IF AN OLE OF ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES 5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF FROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: 9. DURING THE MOST RECENT (Check appropriate boay): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FF dates) 5. If you answered no to 9A, did you provide services valued in excess of \$50,000 directly to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate actual value. Subjects, and you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ 10. Did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ 11. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ 12. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ 13. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ 14. Did you purchase and receive goods valued in excess of \$50,000 from directly outsi					
2. TYPE OF ENTITY [] CORPORATION [] LLC [] LLP [] PARTNERSHIP [] SOLE PROPRIETORSHIP [] OTHER (Specify) 3. IF A CORPORATION or LLC A STATE OF INCORPORATION OR FORMATION OR FORMATION [] B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES OR FORMATION 4. IF AN ILC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS 5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF FROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: B. BRANCH LOCATIONS: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: 9. DURING THE MOST RECENT (Check appropriate bow): [[CALENDAR VR [12 MONTHS or []FISCAL VR (FY dates of STO), 000 directly to customers outside your State? If no, indicate actual value. Solution of the services you provided. 8. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. 8. C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ 1. D. Did you sell good's valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ 2. E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ 8. D. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ 8. D. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ 9. Did you					
2. TYPE OF ENTITY [] CORPORATION] LLC] LLP] PARTNERSHIP] SOLE PROPRIETORSHIP] OTHER (Specify) 3. IF A CORPORATION or LLC A STATE OF INCORPORATION OR FORMATION B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES OR FORMATION 4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS 5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: B. BRANCH LOCATIONS: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A Total: B. At the address involved in this matter: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR 12 MONTHS or FISCAL YR (FY dates) YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. S You answered no to 9A, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
[] CORPORATION [] LLC [] LLP [] PARTNERSHIP [] SOLE PROPRIETORSHIP [] OTHER (Specify) 3. FA CORPORATION or LLC A STATE OF INCORPORATION OR FORMATION B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES 4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS 5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: B. BRANCH LOCATIONS: B. BRANCH LOCATIONS: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) S. If you answered no to 9A, did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. S. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you provide services of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you provide your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you provide your State? If					
[] CORPORATION [] LLC [] LLP [] PARTNERSHIP [] SOLE PROPRIETORSHIP [] OTHER (Specify) 3. FA CORPORATION or LLC A STATE OF INCORPORATION OR FORMATION B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES 4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS 5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: B. BRANCH LOCATIONS: B. BRANCH LOCATIONS: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) S. If you answered no to 9A, did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. S. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you provide services of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you provide your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you provide your State? If					
3. IF A CORPORATION or LLC A STATE OF INCORPORATION OR FORMATION OR FORMATION 4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS 5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. BRANCH LOCATIONS: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: 9. DURING THE MOST RECENT (Check appropriate bay): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) S B. If you answered no to 9A, did you provide services valued in excess of \$50,000 directly to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located inside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$					
A STATE OF INCORPORATION OR FORMATION B. NAME, ADDRESS, AND RELATIONSHIP (e.g. parent, subsidiary) OF ALL RELATED ENTITIES 6. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: 9. DURING THE MOST RECENT (Check appropriate bax): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) / YES NO A Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ 8. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
4. IF AN LLC OR ANY TYPE OF PARTNERSHIP, FULL NAME AND ADDRESS OF ALL MEMBERS OR PARTNERS 5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) / YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. S B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. S C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A Total: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates					
5. IF A SOLE PROPRIETORSHIP, FULL NAME AND ADDRESS OF PROPRIETOR 6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A Total: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates					
6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ 8. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed). 7. A. PRINCIPAL LOCATION: 8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: 9. DURING THE MOST RECENT (Check appropriate box): [CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ 8. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
7. A. PRINCIPAL LOCATION: B. BRANCH LOCATIONS: B. At the address involved in this matter: 9. DURING THE MOST RECENT (Check appropriate box): CALENDAR YR CALEND					
8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: B. At the address involved in this matter: 9. DURING THE MOST RECENT (Check appropriate box): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: B. At the address involved in this matter: 9. DURING THE MOST RECENT (Check appropriate box): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
8. NUMBER OF PEOPLE PRESENTLY EMPLOYED A. Total: B. At the address involved in this matter: 9. DURING THE MOST RECENT (Check appropriate box): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
A. Total: B. At the address involved in this matter: 9. DURING THE MOST RECENT (Check appropriate box): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
A. Total: B. At the address involved in this matter: 9. DURING THE MOST RECENT (Check appropriate box): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates) YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
9. DURING THE MOST RECENT (Check appropriate box): [] CALENDAR YR [] 12 MONTHS or [] FISCAL YR (FY dates YES NO A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. \$ B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
A. Did you provide services valued in excess of \$50,000 directly to customers outside your State? If no, indicate actual value. B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate S					
\$ B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
B. If you answered no to 9A, did you provide services valued in excess of \$50,000 to customers in your State who purchased goods valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. \$ C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
valued in excess of \$50,000 from directly outside your State? If no, indicate the value of any such services you provided. C. If you answered no to 9A and 9B, did you provide services valued in excess of \$50,000 to public utilities, transit systems, newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
newspapers, health care institutions, broadcasting stations, commercial buildings, educational institutions, or retail concerns? If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly to customers located outside your State? If less than \$50,000, indicate amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
amount. \$ E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
E. If you answered no to 9D, did you sell goods valued in excess of \$50,000 directly to customers located inside your State who purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
purchased other goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate amount. \$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
\$ F. Did you purchase and receive goods valued in excess of \$50,000 from directly outside your State? If less than \$50,000, indicate					
amount. \$ G. Did you purchase and receive goods valued in excess of \$50,000 from enterprises who received the goods directly from points					
outside your State? If less than \$50,000, indicate amount. \$					
H. Gross Revenues from all sales or performance of services (Check the largest amount)					
[] \$100,000 [] \$250,000 [] \$500,000 [] \$1,000,000 or more If less than \$100,000, indicate amount.					
I. Did you begin operations within the last 12 months? If yes, specify date:					
10 ARE YOU A MEMBER OF AN ASSOCIATION OR OTHER EMPLOYER GROUP THAT ENGAGES IN COLLECTIVE BARGAINING? [] YES [] NO (If yes, name and address of association or group).					
11. REPRESENTATIVE BEST QUALIFIED TO GIVE FURTHER INFORMATION ABOUT YOUR OPERATIONS					
NAME TITLE E-MAIL ADDRESS TEL. NUMBER					
12. AUTHORIZED REPRESENTATIVE COMPLETING THIS QUESTIONNAIRE					
12. ACTIONIZED REPRESENTATIVE COMPLETING THIS QUESTIONIVALICE					
NAME AND TITLE (Type or Print) SIGNATURE E-MAIL ADDRESS DATE					

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.

UNITED STATES OF AMERICA

BEFORE THE NATIONAL LABOR RELATIONS BOARD

AMAZON.COM	
Charged Party	
and	Case 19-CA-266977
UFCW LOCAL 21	
Charging Party	
AFFIDAVIT OF SERVICE OF CHARGE AC	GAINST EMPLOYER
I, the undersigned employee of the National Labor October 1, 2020, I served the above-entitled docur following persons, addressed to them at the follow Beth Galetti, SVP Human Resources Amazon.com, Inc. P.O. Box 81226 Seattle, WA 98109 AMAZON.COM 410 Terry Ave N Seattle, WA 98109	ment(s) by post-paid regular mail upon the
October 1, 2020	Dennis Snook, Designated Agent of NLRB
Date	Name
	Leila Uomoto
	Signature

NATIONAL LABOR RELATIONS BOARD

NOTICE OF APPEARANCE

United Food and Commercial Workers Union, Local No. 21			
Charging Party			
and	CASE 19-CA-266977		
Amazon			
Charged Party			
EXECUTIVE SECRETARY NATIONAL LABOR RELATIONS BOARD Washington, DC 20570	GENERAL COUNSEL NATIONAL LABOR RELATIONS BOARD Washington, DC 20570		
THE UNDERSIGNED HEREBY ENTERS APPEARANCE AS REPRESENTAT	IVE OF		
IN THE ABOVE-CAPTIONED MATTER.			
CHECK THE APPROPRIATE BOX(ES) BELOW: REPRESENTATIVE IS AN ATTORNEY IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE THAT THE PARTY MAY RECEIVE COPIES OF CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN ADDITION TO THOSE DESCRIBED BELOW, THIS			
BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY V DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMEN CASEHANDLING MANUAL.			
(REPRESENTATIVE INFORMATION)			
Harry Johnson III			
Morgan, Lewis & Bockius LLP MAILING ADDRESS: 2049 Century Park East, Suite 700, Los Angeles, CA 90067			
E-MAIL ADDRESS: harry.johnson@morganlewis.com			
OFFICE TELEPHONE NUMBER: 310.255.9005			
CELL PHONE NUMBER: 310.463.0939	_{FAX:} 310.907.1001		
SIGNATURE;			
(Please sign in ink.) October 8, 2020			

 $^{^{\}rm 1}$ IF CASE IS PENDING IN WASHINGTON AND NOTICE OF APPEARANCE IS SENT TO THE GENERAL COUNSEL OR THE EXECUTIVE SECRETARY, A COPY SHOULD BE SENT TO THE REGIONAL DIRECTOR OF THE REGION IN WHICH THE CASE WAS FILED SO THAT THOSE RECORDS WILL REFLECT THE APPEARANCE.

NATIONAL LABOR RELATIONS BOARD

NOTICE OF APPEARANCE

United Food and Commercial Workers Union, Local No. 21		
Charging Party		
and	CASE 19-CA-266977	
Amazon		
Charged Party		
EXECUTIVE SECRETARY NATIONAL LABOR RELATIONS BOARD Washington, DC 20570	GENERAL COUNSEL NATIONAL LABOR RELATIONS BOARD Washington, DC 20570	
THE UNDERSIGNED HEREBY ENTERS APPEARANCE AS REPRESENTAT	TIVE OF	
IN THE ABOVE-CAPTIONED MATTER.		
CHECK THE APPROPRIATE BOX(ES) BELOW: REPRESENTATIVE IS AN ATTORNEY IF REPRESENTATIVE IS AN ATTORNEY, IN ORDER TO ENSURE THAT THE PARTY MAY RECEIVE COPIES OF CERTAIN DOCUMENTS OR CORRESPONDENCE FROM THE AGENCY IN ADDITION TO THOSE DESCRIBED BELOW, THIS BOX MUST BE CHECKED. IF THIS BOX IS NOT CHECKED, THE PARTY WILL RECEIVE ONLY COPIES OF CERTAIN DOCUMENTS SUCH AS CHARGES, PETITIONS AND FORMAL DOCUMENTS AS DESCRIBED IN SEC. 11842.3 OF THE CASEHANDLING MANUAL.		
(REPRESENTATIVE INFOR	MATION)	
NAME: Harry Johnson III		
MAILING ADDRESS: Morgan, Lewis & Bockius LLP 2049 Century Park East, Suite 700, Los Ar	geles, CA 90067	
E-MAIL ADDRESS: harry.johnson@morganlewis.com		
OFFICE TELEPHONE NUMBER: 310.255.9005		
CELL PHONE NUMBER: 310.463.0939	_{FAX:} 310.907.1001	
SIGNATURE: (Please sign in ink.) October 8, 2020		
DATE: (Please sign in ink.) October 8, 2020		

 $^{^{\}rm 1}$ IF CASE IS PENDING IN WASHINGTON AND NOTICE OF APPEARANCE IS SENT TO THE GENERAL COUNSEL OR THE EXECUTIVE SECRETARY, A COPY SHOULD BE SENT TO THE REGIONAL DIRECTOR OF THE REGION IN WHICH THE CASE WAS FILED SO THAT THOSE RECORDS WILL REFLECT THE APPEARANCE.